


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 29, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 654524</b> 1. Entity Name <b>IDEAL OPTICAL, INC.</b>	
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Principal Place of Business <b>IDEAL OPTICAL INC. 6873 A NORTH 9TH AVE. PENSACOLA FL 32504 US</b>	Mailing Address <b>6873 A NORTH 9TH AVE. PENSACOLA FL 32504 US</b>
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2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc	3. Mailing Address  Suite, Apt. #, etc.
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1st MOORE CR2E034 (10/06)

City & State  Zip Country	City & State  Zip Country
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4. FEI Number <b>59-1977762</b>	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b>  <b>PUTMAN, FRED L 6873 A NORTH 9TH PENSACOLA FL 32504</b>	<b>7. Name and Address of New Registered Agent</b>  Name Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;"><b>FL</b> Zip Code</span>
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing **\$5.00** May Be  
Trust Fund Contribution.  **Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE	VD PUTMAN, TERRY A. <input type="checkbox"/> Delete 6873 A NORTH, 9TH AVE. PENSACOLA FL 32504
TITLE	STD PUTMAN, BRENDA <input type="checkbox"/> Delete 6873 A NORTH, 9TH AVE. PENSACOLA FL 32504
TITLE	PD PUTMAN, FRED L <input type="checkbox"/> Delete 6873 A NORTH, 9TH AVE. PENSACOLA FL 32504
TITLE	<input type="checkbox"/> Delete
TITLE	<input type="checkbox"/> Delete
TITLE	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	U00000610463 02/02/07-80022-018 150.00
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Fred Putman* **FRED L. PUTMAN** 26 JAN 2007 850-477-0582

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #